

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BA	70385	
O.I.P.E. CLASSIFIER		11	3/23
FORMALITY REVIEW	MA	71423	5/26/00
RESPONSE FORMALITY REVIEW		71423	8-7-00

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	9/12/99
2	✓	✓	9/12/99
3	✓	✓	9/12/99
4	✓	✓	9/12/99
5	✓	✓	9/12/99
6	✓	✓	9/12/99
7	✓	✓	9/12/99
8	✓	✓	9/12/99
9	✓	✓	9/12/99
10	✓	✓	9/12/99
11	✓	✓	9/12/99
12	✓	✓	9/12/99
13	✓	✓	9/12/99
14	✓	✓	9/12/99
15	✓	✓	9/12/99
16	✓	✓	9/12/99
17	✓	✓	9/12/99
18	✓	✓	9/12/99
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31	✓	✓	9/12/99
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42	✓	✓	9/12/99
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44	✓	✓	9/12/99
45	✓	✓	9/12/99
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48	✓	✓	9/12/99
49	✓	✓	9/12/99
50	✓	✓	9/12/99

Claim	Final	Original	Date
51	✓	✓	9/12/99
52	✓	✓	9/12/99
53	✓	✓	9/12/99
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98	✓	✓	9/12/99
99	✓	✓	9/12/99
100	✓	✓	9/12/99

Claim	Final	Original	Date
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102	✓	✓	9/12/99
103	✓	✓	9/12/99
104	✓	✓	9/12/99
105	✓	✓	9/12/99
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110	✓	✓	9/12/99
111	✓	✓	9/12/99
112	✓	✓	9/12/99
113	✓	✓	9/12/99
114	✓	✓	9/12/99
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146	✓	✓	9/12/99
147	✓	✓	9/12/99
148	✓	✓	9/12/99
149	✓	✓	9/12/99
150	✓	✓	9/12/99

Best Available Copy

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)